

Headquarters U.S. Air Force

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Kunsan Focused Effort and the Counter-Biological Warfare Concept of Operations



U.S. AIR FORCE

***Lt Col Donna Hudson
AF/XOS-FC
December 7, 2005***



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Overview

- Background
- C-BW Objectives
- Kunsan Focused Effort (KFE)
- Counter-Biological Warfare Concept of Operations (C-BW CONOPS)
 - Tenets & Approach
 - Implementation



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C-CBRNE Ops Program

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Senior Leadership Attention

CORONA Fall 97 ♦

CORONA South 00 ♦

CORONA Top 02 ♦

VCSAF FORUM 03 ♦

♦ SECAF/CSAF 03

**C-CBRNE
Management**

C-CBRNE Council/PWG
C-CBRNE Master Plan/Roadmaps

**Education, Training &
Exercise Initiative**

WMD Studies and Analyses

Fogleman Report
QDR 97/RAND
J5/J8 Studies
CORAL BREEZE
DESERT BREEZE

**Sortie
Generation
at Risk**

AF Studies
Fight the Base
FSTR
APOD
Counterforce

**Internal
AF
Review**

**Significant
Improvement
Possible**

♦ AF CP Master Plan '97 ♦ AFDD 2-1.8 ♦
♦ AF C-CBW Roadmap ♦ AFPD 10-26 ♦
AF/XO Readiness Review

**Air Force
Response**

♦ BD Commanders' Guidelines
♦ USAF Bio Defense Study
Interim Bio-Defense Plan ♦

C-BW

**BD Task
Force**

**Kunsan Focused
Effort**

Bio Security/Vaccinations
Emergency Health Powers

♦ CSAF Status Reports ♦

9/11

C-CBRNE CONOPS

Concept Paper ♦

AFMAN 10-2602 ♦

PACAF C-CW CONOPS ♦

XO/IL C-CW Task Force ♦

MAJCOM Awareness Briefings ♦

C-CW

♦ Functional
Workshops ♦

MAJCOM Training

OEAs

Wing-level Training

♦ Concept Study
Capability
Assessments ♦

C-RW

1996

\$4M/YR

1998

2000

\$8M/YR

2002

2004

\$12M/YR

2006

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KFE Objectives

- Produce operationally relevant C-BW strategies, plans, and procedures
 - Non-materiel solutions developed by functional experts and based on scientific data and ops analysis
 - Use existing wing C-BW capabilities / infrastructure
 - Complement C-CW procedures
- Provide the basis for a C-BW CONOPS and guidance for AF units to prepare, respond, operate, sustain, and recover

PREPARATION			
	HAZARD ASSESSMENT	INTELLIGENCE	
TRAINING	METEOROLOGY	PREVENTIVE MEDICINE	
	SURVEILLANCE	CLINICAL DIAGNOSTICS	
SAMPLING	DETECTION	IDENTIFICATION	
	PHYSICAL PROTECTION	WARNING	
ALERT	REPORTING	NOTIFICATION	
	TREATMENT	CASUALTY MANAGEMENT	
EVACUATION	QUARANTINE/ ISOLATION	CASUALTY REPLACEMENT	
	CONTAMINATION CONTROL	MORTUARY AFFAIRS	

“To develop and institutionalize a comprehensive, AF-wide counter-biological warfare concept of operations for both deployed forces and homeland defense.”

CSAF Message July 2002



Base Selection Considerations

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- High ops tempo, wartime posture, and recognized threat of BW attack
- Senior leadership buy-in and commitment
- Senior staff stability throughout study period
- C-BW materiel and non-materiel solution sets in place (e.g., C-CW CONOPS in place, updated FSTR 10-2 plans, DoD sampling kits, RAPIDS, standard laboratory capability, in-place patient decontamination, etc.)
- Aggressive exercise schedule that can be leveraged



PACAF/CC approved Kunsan AB as test-bed (KFE)

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“The Wolfpack”



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Kunsan Focused Effort

- **Develop C-BW mitigating strategies at a fixed-site installation for mission sustainment and recovery in a wartime environment**
- **First USAF analytic effort that quantitatively links BW to operational capability**
- **Utilize existing equipment and current capabilities (not an ACTD)**
- **Cross-functional team**
 - **AF/XOS-FC, NWCA C-CBRNE Division, AF/XOS-FP, FP Battle Lab, AF/ILEX, AF/ACESA, AF/SGOP, PACAF, 7AF**

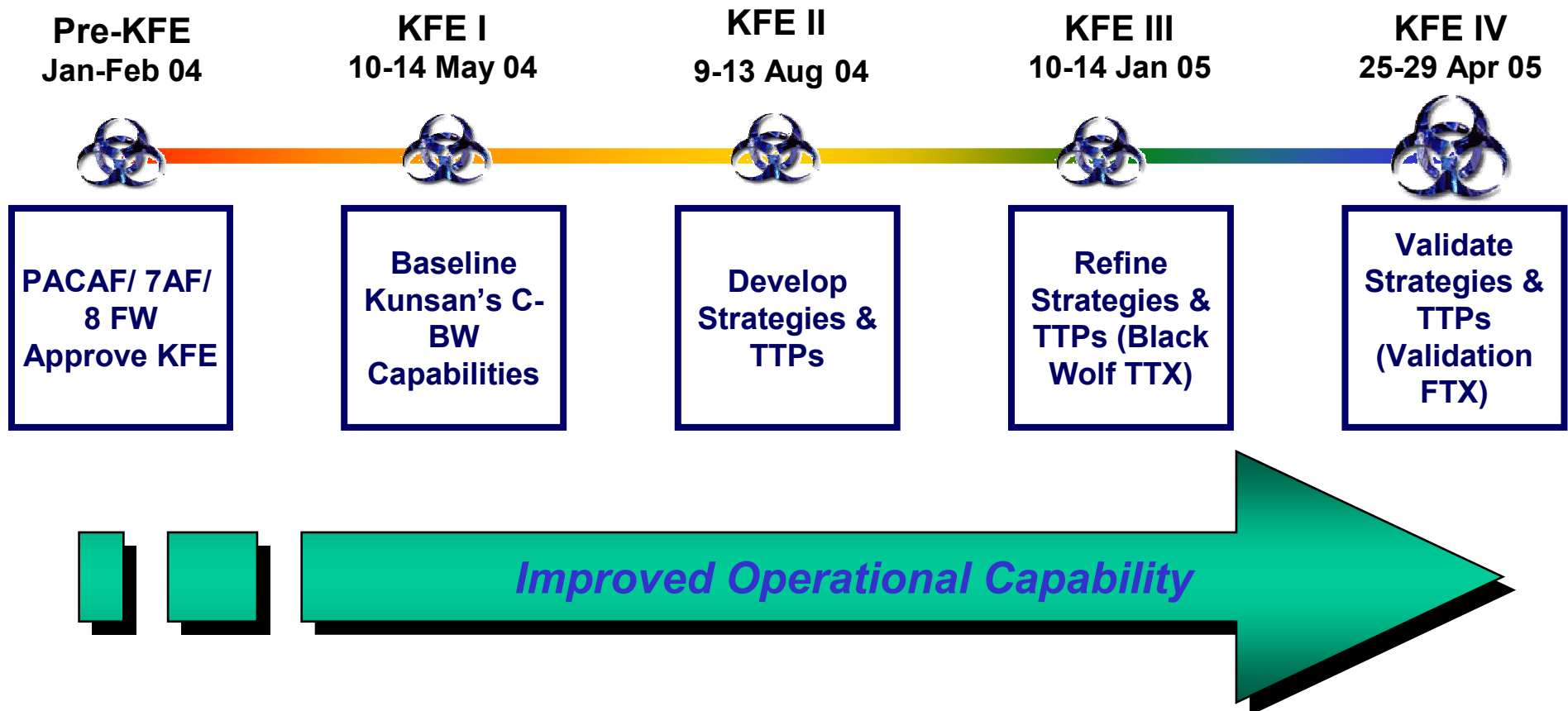
Improve USAF ability to recover and sustain operations in a BW environment in a real world setting

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KFE Timeline



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Baseline Assessment (May 04)

Kunsan can mitigate the effects of a BW attack, BUT...

- Requires additional understanding of the nature of BW
 - C-CW TTPs well rehearsed, but often inappropriate for C-BW
- Must optimize use of detection devices/methods available
 - First detection of an attack may be casualties
- Need basic C-BW plans/guidelines
 - Preparation and prompt decision making are key to success
 - Not a “MDG problem” to solve; must involve entire base
- Personnel turnover rate impacts C-BW readiness
 - Need to document solutions and plans
- Combined / Joint operations complicate planning and response



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Key Operational Questions

- **What is the BW “threat”?**
 - **What bio-agents can be effectively delivered by which mechanisms under what conditions and which are the most effective?**
 - **What will the effect on the base be?**
- **What is the residual hazard posed by re-aerosolization, surface contact, or person-to-person transfer?**
- **How much can we rely on our detectors?**
 - **How do we better use our detection and identification equipment based upon the character of the attack?**
- **What can we do about a BW attack?**
 - **How do vaccination, antibiotics, masking, restriction of movement, and decon impact the effects of the attack?**
- **What are the critical timelines for implementing responses?**



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KFE Lessons: The BW Threat

- **Many effective BW attacks are possible with different agents and delivery means, but there are significant challenges**
 - **Large scale military application of BW has never been done**
 - **Requires the development and production of quality agents and delivery methods (large scale testing)**
 - **All of the pieces have been done but there is high uncertainty when linking them all together**
- **Combat capability may be affected by BW attack**
 - **Limited operational flexibility with large casualties particularly within key AFSCs**
 - **Mission degradation varies by agent (disease) type**



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KFE Lessons: BW Residual Hazard

- Large area decon may not significantly reduce outdoor residual hazard
 - Difficult to determine where to decon and to verify effectiveness
- Most BW agents are not persistent
 - Time and sunlight reduce most agent levels significantly
 - Anthrax may reaerosolize from vehicle movement in the vicinity of agent release (high deposition)
- Other protective measures may be available (e.g., prophylaxis, masks, etc)

Decon may not be possible or required





KFE Lessons: BW Detection and Identification

- **Timely detection of covert attacks is difficult due to agent identification technology insensitivities and operational modes**
- **Sentinel casualties are likely first indicator of many attacks**
 - **Still require diagnosis (agent identification) for best treatment and hazard management**



Focus on medical surveillance and education to more quickly recognize and isolate infected personnel



- **MCU-2 mask provides good protection, but must be worn during the attack – detection limitations make this unlikely**
- **Vaccine and/or prophylaxis treatment is highly effective for some BW agents**
- **Additional disease containment measures are important for contagious diseases**
 - **Social distancing, personal hygiene, restriction of movement and quarantine measures can significantly reduce casualties**
 - **Surgical masks worn by infected personnel can reduce secondary infections**

The image block contains two separate photographs. The left photograph shows a close-up of a person's hand wearing a white nitrile glove, holding a small, clear glass vial. The vial has a white label with black text that is partially legible, mentioning 'VACCINE' and 'BIOLOGICAL'. The right photograph shows a soldier in full combat uniform, including a camouflage jacket and a beret. The soldier is wearing a white surgical mask that covers their nose and mouth. The background of the soldier's photo appears to be an outdoor setting with trees.

The diversity of the BW threat and the limitations of current C-BW capabilities mandate a layered defense strategy



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KFE Lessons: Response Timelines

- Medical intervention is most effective before symptoms
 - Pre-attack vaccination of personnel for smallpox and anthrax is very beneficial
- Timelines for mass prophylaxis in response to sentinel casualties are very short
 - Agent-specific

Maximum effectiveness requires a planned and exercised response



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KFE Lessons: Managed Risk Strategy

- Use new procedures to compensate for equipment shortfalls
- Layered response actions required – no “silver bullet” technology
- Involve entire base population
- Organize responses around “trigger” events:
 - Intelligence Warning
 - Weapon Event
 - Detector Alarm
 - Sentinel Casualty
- With few exceptions the responses are additive, BUT...
 - The risk/benefit calculation to implement a specific action changes based upon the trigger

**Risk management requires a sophisticated understanding of
the biological hazard environment**



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KFE Lessons: Layered BW Defense





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C-BW Responses By Trigger Event

Intelligence Warning:

- Initiate vaccination
- Distribute/ initiate prophylaxis
- Elevate detector status
 - 24/7 & smart mode
- Restrict movement
 - Minimize contacts, close facilities, cancel events
- Implement collective protection
- Increase MOPP
- Increase FPCON
- Increase surveillance
 - Med, air, food, and water

Weapon Event:

- Take shelter
- Run detectors in manual mode
- Restrict access to impact areas
- Conduct environmental bio sampling

Detector System Alarm:

- Don military mask / increase MOPP
- Implement contamination avoidance
 - Personal hygiene and decon
- Conduct forensic sampling
- Confirm detection via RAPIDS or ECL

Sentinel Casualties:

- Clinical diagnosis and treatment
- Quarantine and isolate personnel
- Don surgical masks (if contagious)
- Casualty management planning and preparation
- Personnel management decisions

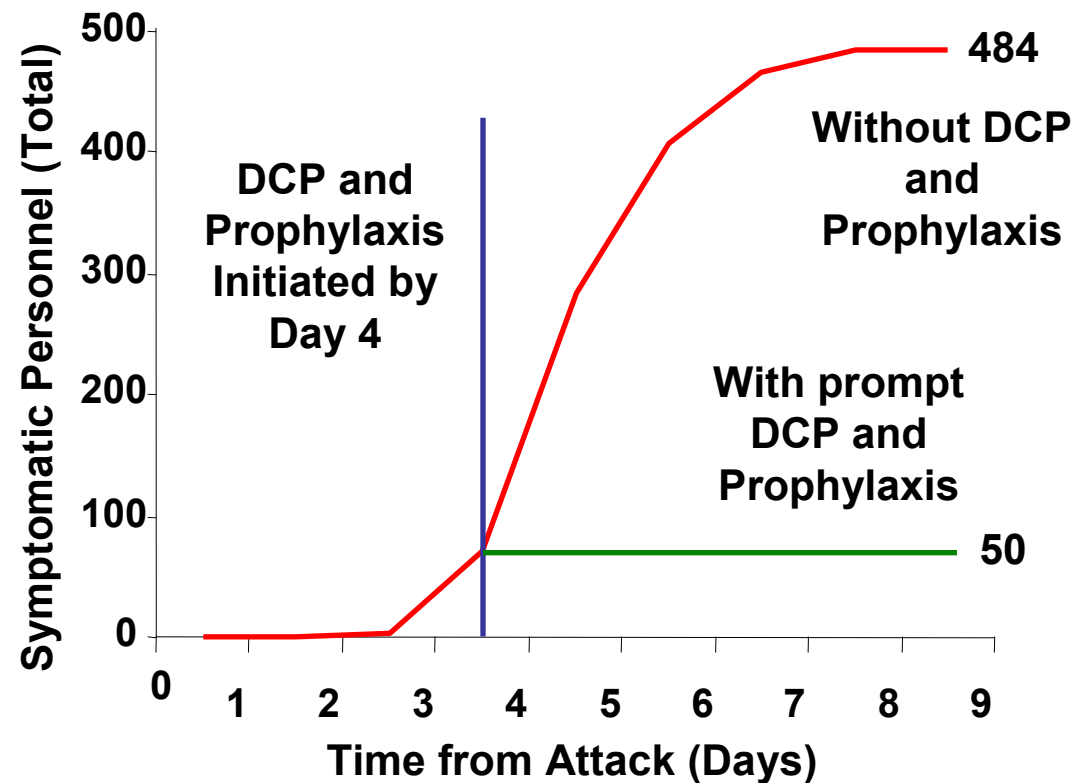


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Validation FTX (Apr 05)

- Three-day wing-wide exercise to validate strategies and TTPs
 - Initial response through sustainment and recovery
 - Mission requirements consistent with wartime taskings

- Quick recognition and execution of DCP was key to effective response
- Pre-distribution of prophylaxis reduced casualties and prevented deaths
 - Reduced direct casualties by $\approx 90\%$

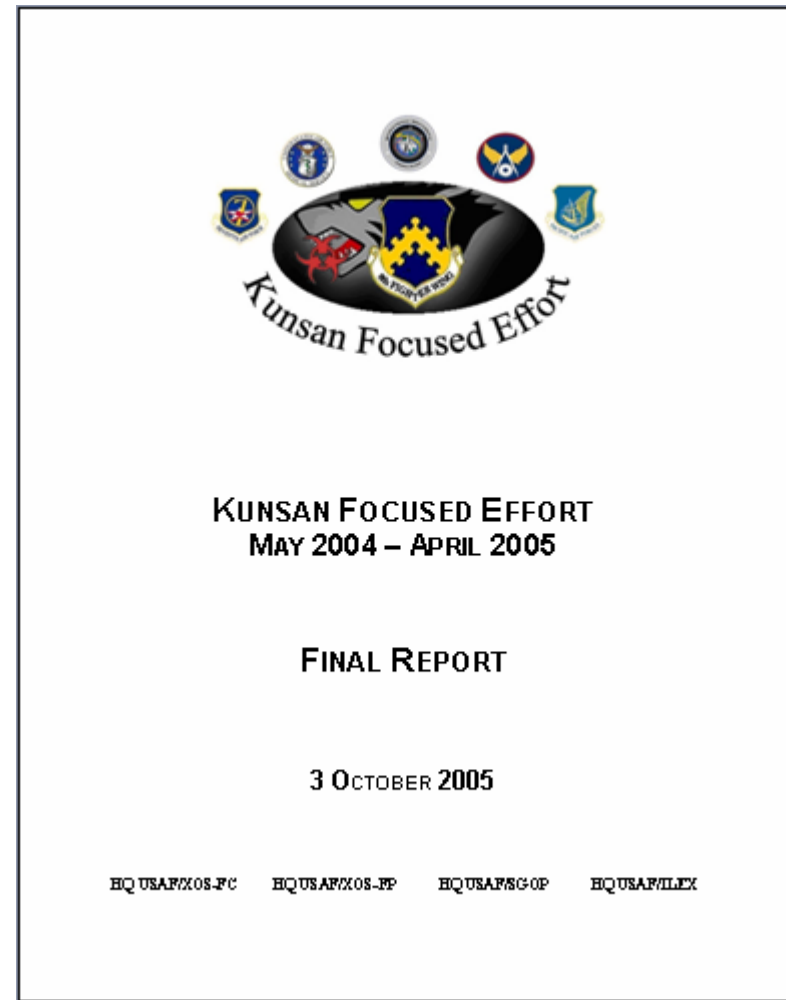




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KFE Final Report

- Entered coordination on 3 Oct 05
- Findings and recommendations:
 - Threat & Hazard Environment
 - Detection & Identification
 - Protection & Decontamination
 - Disease Containment
 - Operations
- Working towards:
 - CSAF approval
 - Final out-briefs to 8 FW, 7 AF, USFK, PACAF, PACOM





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KFE Products & Tools

Education & Training

- BW Threat Intel Brief
- BW Threat Analysis & Briefing
- Bio Agent Smart Cards
- BW Knowledge Survey
- Operational Impact Analysis & Briefings

Sampling, Detection, & ID

- Biological Agent Testing Guidance
- Equipment Optimization Analysis

Decontamination

- Residual Hazard Database
- Decontamination Matrix

Disease Containment

- Disease Containment Plan
- Medical Treatment Protocols Guidelines

Decision Support / Wing Commander & Staff Tools

- Commander's Decision Tool
- Threat Working Group Charter
- Public Affairs Toolbox
- Legal Review and Analysis
- Force Protection Measures
- Mask/De-Mask Matrix
- AF Procedures for Investigating a Bio Event



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C-BW CONOPS

- High-level concepts for how to work through a biological event
 - Addresses planning, response, and mission sustainment and recovery
 - Focuses on base-level actions
 - Based on KFE findings
- Entered coordination on 26 Sep 05
- Working towards:
 - CSAF signature by Dec 05
 - AF-wide implementation complete by Apr 07

	4-LETTER COORDINATION DRAFT
1	
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5	USAF
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8	Counter-Biological Warfare
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11	Concept of Operations
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21	OPR: AF/XOS-FC
22	OCR: AF/XOS-FP, AF/LEX, AF/SGOP
23	
24	26 September 2005
25	
	4-LETTER COORDINATION DRAFT
	1



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Tenets of C-BW CONOPS ***(1 of 2)***

- **CONOPS applies to all biological events**
 - **Biological warfare**
 - **Biological terrorism**
 - **Naturally occurring disease outbreaks**
- **Commanders decision making abilities may be hampered**
 - **Information will be limited**
 - **Timeline for actions will be compressed**
 - **Requires balancing mission criticality and risk to personnel**
- **CONOPS is based on Trigger Event Concept**
 - **The trigger event will determine the appropriate responses to the BW event**



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Tenets of C-BW CONOPS ***(2 of 2)***

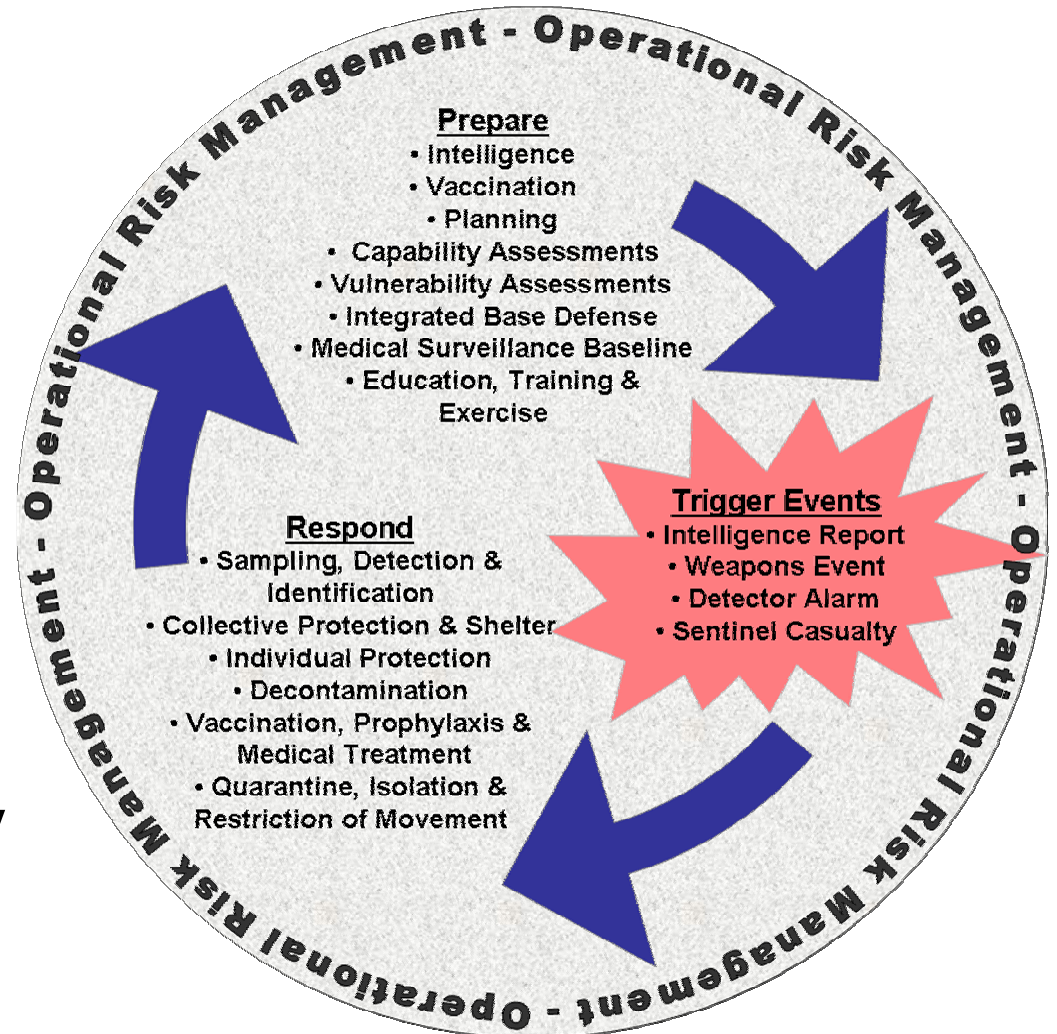
- **Preparation will determine the response options available**
- **Measures to maintain operations:**
 - **Minimize casualties through layered defenses**
 - **Avoid exposure**
 - **Mitigate impacts of exposure**
- **Risk Management Strategy**
 - **Understanding the hazard and operational implications is essential to implementing risk management strategy**
 - **Requires education and training (ETE Initiative)**



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C-BW CONOPS Approach

- Prevent or minimize personnel exposure
- Mitigate the impact of exposure
- Balance protection of personnel with need to sustaining operations
 - Apply ORM principles, techniques, and decision tools
 - Make best use of layered defense strategy
- Implementation requires guidance and training not new equipment



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C-BW CONOPS Way Ahead

- Implement C-BW CONOPS at other constructs (i.e., different missions, populations, and operational imperatives)
- Publish C-BW policy, guidance, and TTPs
- Education, train, and exercise AF personnel
- Expand scientific and technical analysis

KFE
Products

KFE Final
Report

C-BW
CONOPS

**C-BW CONOPS
Implementation Working
Group
(Air Staff & MAJCOMs)**

United States Air Force
Counter-Chemical, Biological, Radiological,
Nuclear, and High-Yield Explosives
(C-CBRNE) Master Plan

FY 2006-2007
Define, Organize, Train, and
Equip Roadmaps



Directorate of Strategic Security
Deputy Chief of Staff, Air and Space Operations
Headquarters United States Air Force
Washington, DC

Implementation activities tracked through C-CBRNE Roadmaps

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QUESTIONS?

COMMANDERS' C-CBRNE RESOURCE

FAQs Links Library Exercises & Assistance What's New!

CHEMICAL BIOLOGICAL RADIOLOGICAL NUCLEAR EXPLOSIVES

This website is designed to provide information to assist the commander in preparing for and operating in a CBRNE environment. Information contained within should not be construed as official guidance. When there is a conflict between this information and orders issued by your commanding authority, comply with your commanding authority in ALL instances.

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https://www.xo.hq.af.mil/xos/xosf/xosfc/c-cbrne_resources/index.shtml (UNCLASSIFIED)

<http://chembio.xo.af.pentagon.smil.mil/bio-smallpox.shtml> (CLASSIFIED)

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